

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

LAW OFFICE OF AVRAM D. WHITE
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Avram D. White, Esq
Counsel to the Debtor

In Re:

PAULETTE WRIGHT,

Debtor.

Case No.: 16-13321-RG

Chapter: 13

Adv. No.: _____

Hearing Date: January 3, 2018

Judge: GAMBARDELLA

CERTIFICATION OF SERVICE

1. I, Avram D.White, Esq. :

☒ represent PAULETTE WRIGHT in this matter.

☐ am the secretary/paralegal for _____, who represents
_____ in this matter.

☐ am the _____ in this case and am representing myself.

2. On December 4, 2017, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.

Notice of Chapter 13 Plan Transmittal
Chapter 13 Plan
CMA for 185 Dodd Street, East Orange, New Jersey 07017

3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: December 4, 2017

/s/ Avram D. White
Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
M and T Bank Attn: Denise Carlon, Esq. KML Law Group, P. C. 216 Haddon Avenue, Suite 406 Westmont, New Jersey 08108	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
City of East Orange Office of the City Clerk 44 City Hall Plaza East Orange, New Jersey 07018	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
New Jersey Anesthesia Associates 30 B Vreeland Road Suite 200 Florham Park, New Jersey 07932	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

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